Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::
Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No
Number of copies of CRF:: 0

Title:: DISPENSER FOR FOLDED ABSORBENT

SHEET PRODUCTS

Attorney Docket Number:: 1517-1032

Request for Early Publication?:: No Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 4

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: UNITED STATES OF AMERICA

Status:: Full Capacity

Given Name:: ROBERT

Middle Name:: C.

Family Name:: HOCHTRITT

City of Residence:: NEENAH

State or Province of WISCONSIN

Residence::

Country of Residence:: UNITED STATES OF AMERICA

Street of Mailing 1867 EAGLE DRIVE

Address::

City of Mailing Address:: NEENAH

State or Province of Mailing Address:: WISCONSIN

Country of Mailing Address:: UNITED STATES OF AMERICA

Postal or Zip Code of Mailing Address:: 54956

Applicant Authority Type:: Inventor

Primary Citizenship Country:: UNITED STATES OF AMERICA

Status:: Full Capacity

Given Name:: ANDREW

Middle Name:: M.

Family Name:: CONGER

City of Residence:: NEENAH

State or Province of WISCONSIN

Residence::

Country of Residence:: UNITED STATES OF AMERICA

Street of Mailing 2975 FAIRWINDS DRIVE

Address::

City of Mailing Address:: NEENAH

State or Province of Mailing Address:: WISCONSIN

Country of Mailing Address:: UNITED STATES OF AMERICA

Postal or Zip Co	ode of Mailing Ad	ldress:: 54956	
Correspondence I	Information		
Correspondence Customer		000466	
Number::			
Representative :	Information		
Representative Customer		000466	
Number::			
Domestic Priori	ty Information		n + Diling
Application::	Continuity	Parent	Parent Filing
	Type::	Application::	Date::
Foreign Priori	ty Information		
Country::	Application	Filing Date::	Priority
	Number::		Claimed::
Assignment Inf	formation		
Assignee Name:			
Street of Mail			
	-		
City of Mailir	ng Address::		
	ince of Mailing	Address::	
	iling Address::		
Postal or Zin	Code of Mailing	Address::	
rustar or bip	· ·		